

HEALTHY PEOPLE. HEALTHY COMMUNITIES.

Dorothy F. Teeter, MHA, Interim Director and Health Officer

REQUEST FOR PUBLIC RECORDS

Type in your information in the blanks below or print it out and write in your information. Sign your printed copy and mail it to: Public Disclosure Requests, c/o Lisa Werlech, 999 3rd Ave, Suite 1200, Seattle, WA 98104.

Date:	
Name:	
Address:	
City:	State Zip
Email:	
Please include your mailing address because many documents are only available hard copy and must be sent to you via US Mail.	
Describe as specifically as you can what records you are requesting. The more information we have identifying records, the more quickly and accurately we will be able to respond to your request.	
List the types of documents (examples: correspondence, notice of violations, inspection reports, etc)	
Time period for the records you are requesting:	
Signature:	
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Available in alternate format upon request pursuant to ADA.



